

PCT

REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

for receiving Office use only

International Application No.

International Filing Date

Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference
(if desired) (12 characters maximum) MGH / PC / P10758PC

Box No. I TITLE OF INVENTION

"USE OF PEPTIDES"

Box No. II APPLICANT

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

UNIVERSITY COURT OF THE UNIVERSITY OF
DUNDEE
NETHERGATE
PERTH ROAD
DUNDEE DD1 4HN
UNITED KINGDOM

This person is also inventor.

Telephone No.

Facsimile No.

Teleprinter No.

State (that is, country) of nationality:
GB

State (that is, country) of residence:
GB

This person is applicant for the purposes of: all designated States all designated States except the United States of America the United States of America only the States indicated in the Supplemental Box

Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

PROUD CHRISTOPHER GREGORY
DEPARTMENT OF ANATOMY & PHYSIOLOGY
MSI / WTB COMPLEX
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This person is:

applicant only

applicant and inventor

inventor only (If this check-box is marked, do not fill in below.)

State (that is, country) of nationality:
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State (that is, country) of residence:
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This person is applicant for the purposes of: all designated States all designated States except the United States of America the United States of America only the States indicated in the Supplemental Box

Further applicants and/or (further) inventors are indicated on a continuation sheet.

Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE

The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as:

agent

common representative

Name and address:

McCALLUM, William Potter; MacDOUGALL, Donald Carmichael; SZCZUKA, Jan Tymoteusz; NAISMITH, Robert Stewart; HORNER, Martin Grenville, SHANKS, Andrew; NEWELL, Campbell; KERR, Sheila Agnes Fife; MORELAND, David; GODWIN, Edgar James; all of

CRUIKSHANK & FAIRWEATHER, 19 ROYAL EXCHANGE SQUARE,
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Telephone No.
0141 221 5767

Facsimile No.
0141 221 7739

Teleprinter No.

Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

Continuation of Box No. III (FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S))

If none of the following sub-boxes is used, this sheet should not be included in the request.

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

HERBERT TERENCE PATRICK
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UNITED KINGDOM

This person is:

 applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below.)

State (that is, country) of nationality:
GB

State (that is, country) of residence:
GB

This person is applicant for the purposes of: all designated States all designated States except the United States of America the United States of America only the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

LANE DAVID PHILIP
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UNITED KINGDOM

This person is:

 applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below.)

State (that is, country) of nationality:
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State (that is, country) of residence:
GB

This person is applicant for the purposes of: all designated States all designated States except the United States of America the United States of America only the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

FAHRAEUS ROBIN
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UNITED KINGDOM

This person is:

 applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below.)

State (that is, country) of nationality:
SWEDISH

State (that is, country) of residence:
GB

This person is applicant for the purposes of: all designated States all designated States except the United States of America the United States of America only the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

This person is:

 applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below.)

State (that is, country) of nationality:

State (that is, country) of residence:

This person is applicant for the purposes of: all designated States all designated States except the United States of America the United States of America only the States indicated in the Supplemental Box

Further applicants and/or (further) inventors are indicated on another continuation sheet.

Box No.V DESIGNATION OF STATES

The following designations are hereby made under Rule 4.9(a) (mark the applicable check-boxes; at least one must be marked):

Regional Patent

AP ARIPO Patent: GH Ghana, GM Gambia, KE Kenya, LS Lesotho, MW Malawi, SD Sudan, SL Sierra Leone, SZ Swaziland, TZ United Republic of Tanzania, UG Uganda, ZW Zimbabwe, and any other State which is a Contracting State of the Harare Protocol and of the PCT

EA Eurasian Patent: AM Armenia, AZ Azerbaijan, BY Belarus, KG Kyrgyzstan, KZ Kazakhstan, MD Republic of Moldova, RU Russian Federation, TJ Tajikistan, TM Turkmenistan, and any other State which is a Contracting State of the Eurasian Patent Convention and of the PCT

EP European Patent: AT Austria, BE Belgium, CH and LI Switzerland and Liechtenstein, CY Cyprus, DE Germany, DK Denmark, ES Spain, FI Finland, FR France, GB United Kingdom, GR Greece, IE Ireland, IT Italy, LU Luxembourg, MC Monaco, NL Netherlands, PT Portugal, SE Sweden, and any other State which is a Contracting State of the European Patent Convention and of the PCT

OA OAPI Patent: BF Burkina Faso, BJ Benin, CF Central African Republic, CG Congo, CI Côte d'Ivoire, CM Cameroon, GA Gabon, GN Guinea, GW Guinea-Bissau, ML Mali, MR Mauritania, NE Niger, SN Senegal, TD Chad, TG Togo, and any other State which is a member State of OAPI and a Contracting State of the PCT (if other kind of protection or treatment desired, specify on dotted line)

National Patent (if other kind of protection or treatment desired, specify on dotted line):

AE United Arab Emirates

AL Albania

AM Armenia

AT Austria

AU Australia

AZ Azerbaijan

BA Bosnia and Herzegovina

BB Barbados

BG Bulgaria

BR Brazil

BY Belarus

CA Canada

CH and LI Switzerland and Liechtenstein

CN China

CR Costa Rica

CU Cuba

CZ Czech Republic

DE Germany

DK Denmark

DM Dominica

EE Estonia

ES Spain

FI Finland

GB United Kingdom

GD Grenada

GE Georgia

GH Ghana

GM Gambia

HR Croatia

HU Hungary

ID Indonesia

IL Israel

IN India

IS Iceland

JP Japan

KE Kenya

KG Kyrgyzstan

KP Democratic People's Republic of Korea

KR Republic of Korea

KZ Kazakhstan

LC Saint Lucia

LK Sri Lanka

LR Liberia

LS Lesotho

LT Lithuania

LU Luxembourg

LV Latvia

MA Morocco

MD Republic of Moldova

MG Madagascar

MK The former Yugoslav Republic of Macedonia

MZ Mozambique

MN Mongolia

MW Malawi

MX Mexico

NO Norway

NZ New Zealand

PL Poland

PT Portugal

RO Romania

RU Russian Federation

SD Sudan

SE Sweden

SG Singapore

SI Slovenia

SK Slovakia

SL Sierra Leone

TJ Tajikistan

TM Turkmenistan

TR Turkey

TT Trinidad and Tobago

TZ United Republic of Tanzania

UA Ukraine

UG Uganda

US United States of America

UZ Uzbekistan

VN Viet Nam

YU Yugoslavia

ZA South Africa

ZW Zimbabwe

Check-boxes reserved for designating States which have become party to the PCT after issuance of this sheet:

AG Antigua and Barbuda

DZ Algeria

Precautionary Designation Statement: In addition to the designations made above, the applicant also makes under Rule 4.9(b) all other designations which would be permitted under the PCT except any designation(s) indicated in the Supplemental Box as being excluded from the scope of this statement. The applicant declares that those additional designations are subject to confirmation and that any designation which is not confirmed before the expiration of 15 months from the priority date is to be regarded as withdrawn by the applicant at the expiration of that time limit. (Confirmation (including fees) must reach the receiving Office within the 15-month time limit.)

Box No. VI PRIORITY CLAIMS		<input type="checkbox"/> Further priority claims are indicated in the Supplemental Box.		
Filing date of earlier application (day/month/year)	Number of earlier application	Where earlier application is:	national application: country	regional application: regional Office
item (1) 21/06/1999	9914480.0	UNITED KINGDOM		
item (2).				
item (3)				

The receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) (only if the earlier application was filed with the Office which for the purposes of the present international application is the receiving Office) identified above as item(s): (1)

* Where the earlier application is an ARIPO application, it is mandatory to indicate in the Supplemental Box at least one country party to the Paris Convention for the Protection of Industrial Property for which that earlier application was filed (Rule 4.10(b)(ii)). See Supplemental Box.

Box No. VII INTERNATIONAL SEARCHING AUTHORITY

Choice of International Searching Authority (ISA) (if two or more International Searching Authorities are competent to carry out the international search, indicate the authority chosen; the two-letter code may be used): ISA /	Request to use results of earlier search; reference to that search (if an earlier search has been carried out by or requested from the International Searching Authority):		
	Date (day/month/year)	Number	Country (or regional Office)

Box No. VIII CHECK LIST: LANGUAGE OF FILING

This international application contains the following number of sheets:	This international application is accompanied by the item(s) marked below:
request : 4	1. <input checked="" type="checkbox"/> fee calculation sheet
description (excluding sequence listing part) : 30	2. <input type="checkbox"/> separate signed power of attorney
claims : 2	3. <input type="checkbox"/> copy of general power of attorney; reference number, if any:
abstract : 1	4. <input type="checkbox"/> statement explaining lack of signature
drawings : 12	5. <input type="checkbox"/> priority document(s) identified in Box No. VI as item(s):
sequence listing part of description : -	6. <input type="checkbox"/> translation of international application into (language):
Total number of sheets : 49	7. <input type="checkbox"/> separate indications concerning deposited microorganism or other biological material
	8. <input type="checkbox"/> nucleotide and/or amino acid sequence listing in computer readable form
	9. <input checked="" type="checkbox"/> other (specify): Form 23/77

Figure of the drawings which should accompany the abstract:

Language of filing of the international application:

Box No. IX SIGNATURE OF APPLICANT OR AGENT

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).



MARTIN G. HORNER

For receiving Office use only		
1. Date of actual receipt of the purported international application:	2. Drawings:	
3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:	<input type="checkbox"/> received: <input type="checkbox"/> not received:	
4. Date of timely receipt of the required corrections under PCT Article 11(2):		
5. International Searching Authority (if two or more are competent): ISA /	6. <input type="checkbox"/> Transmittal of search copy delayed until search fee is paid.	

For International Bureau use only

Date of receipt of the record copy by the International Bureau: